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U.S. Healthcare BPO Market - Payer (Claims Processing, HR Services, and Finance and Accounts), Provider (Medical Billing and Coding), and Pharmaceutical (Clinical Trials, Contract Manufacturing, and Non-Clinical Services) - Trends and Global Forecasts to 2018

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Abstracts

The U.S. healthcare outsourcing market has great potential for growth owing to the measures taken by the government to curb the ever-increasing healthcare costs. The other factors that have led to the growth of the market are: developments and innovation in information technology and regulatory changes. Approximately 75% of U.S. healthcare companies outsource their work to external locations. This is due to the shortage of qualified staff in key positions, such as nurses and coders, and due to the new set of rules and regulations that they need to comply with. Some services that are commonly outsourced are insurance claims processing, adjudication and receivables management, billing and coding services, radiology reporting, transcription services, and clinical outsourcing, among others.

Implementation of various reforms such as the American Recovery and Reinvestment Act of 2009 and the Health Information Technology for Economic and Clinical Health Act (HITECH) as well as the conversion from the ICD-9 coding system to the ICD-10 coding system (to be implemented by October 2014) has created an upward growth trend. Furthermore, constant improvements in the quality of work from destination countries have reinforced the confidence of various healthcare payers, providers, and pharmaceutical companies in outsourcing. This is considered as the key driver of the healthcare process outsourcing market. On the other hand, data security and confidentiality concerns are the restraints for the growth of the market.

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The key players in this market are Accenture (Ireland), GeBBS Healthcare (U.S.), Quintiles (U.S.), Covance (U.S.), PPD (U.S.), Parexel International (U.S.), Lonza (Switzerland), Catalent (U.S.), Boehringer Ingelheim (Germany), and DSM Pharma (U.S.).

In this report, the U.S. healthcare BPO market is categorized into three segments, namely, payer outsourcing, provider outsourcing, and pharmaceutical outsourcing. Each segment is further sub-segmented on the basis of services provided. Payer services consist of claims processing, HR services, member services/customer care, and finance and accounts. Provider services include medical billing, medical coding, medical transcription, and finance and accounts. Pharmaceutical services comprise clinical research organizations (CROs), contract manufacturing organizations (CMOs), and non-clinical services. An exhaustive value analysis for all these markets is provided for 2011, 2012, and 2013, with forecast till 2018.

Scope of the Report

This research report categorizes the U.S. healthcare BPO market into the following segments and sub-segments. Each market segment is further categorized on the basis of the services provided.

The U.S. Healthcare BPO Market, by Segment:

Payer

Provider

Pharmaceutical

The U.S Healthcare Payer Outsourcing Market, by Services:

Claims Processing

HR Services

Member Services/Customer Care

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Finance and Accounts

The U.S Healthcare Provider Outsourcing Market, by Services:

Medical Billing

Medical Coding

Medical Transcription

Finance and Accounts

The U.S Healthcare Pharmaceutical Outsourcing Market, by Services:

CRO Market

Drug Discovery

Pre-clinical

Phase I

Phase II

Phase III

Phase IV

Clinical Data Management and Biostatistics

Medical Writing

Regulatory Services Outsourcing

Other Services

CMO Market

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API Manufacturing

Formulation & Packaging

Non-clinical Services Market

Supply Chain Management and Logistics

Sales and Marketing Management

Other Non-clinical Functions

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9.13 LONZA GROUP LTD.

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9.14 PAREXEL INTERNATIONAL CORPORATION
9.15 QUINTILES TRANSNATIONAL HOLDINGS, INC.
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